Contact details

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| --- | --- | --- | --- |
| **Name** |  | | |
| **Position title (if relevant)** |  | | |
| **Address** |  | | |
| **Phone (work)** |  | **Mobile** |  |
| **Email** |  | | |
| **Date** |  | | |

Please indicate your preferred method of contact:

**□** Phone (note all verbal communication will be confirmed in writing)

**□** Email

**□** Mail

Type of complaint

**□** I am making the complaint on behalf of myself

**□** I am making the complaint on behalf of someone else. Please state who the complaint is on behalf of and your relationship to them:

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**□** I am making the complaint on behalf of a service/organisation. Please state the name of the organisation and your job title:

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Complaint topic

**□** Staff member **□** Organisation communications

**□** Program/ services activities **□** Organisations operations

**□** Other

Complaint description

Please provide a brief description of your complaint outlining (if possible) dates, times, people and locations as this will assist us in responding to your complaint. We also encourage you to identify your desired outcomes and expectations to resolve the complaint.

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This document can be submitted to BRADAAG via

Email: info@bradaag.org.au

Phone: 08 8963 2500

Mail: Att: Complaints

BRADAAG

PO Box 813 Tennant Creek NT 0861